Department of Veterans Affairs

Memorandum

Date: July 27, 2016

From: Assistant Inspector General for Investigations (51)

Subj: Administrative Investigation – Alleged Misuse of Travel Funds, Veterans Health

Administration (VHA), VA National Center for Patient Safety (NCPS), Ann

Arbor, MI – Report No. 15-02226-327 (2015-02226-IQ-0011)

To: Under Secretary for Health (10)

Purpose

VA OIG Hotline received an allegation that Dr. Robin Hemphill, Acting Assistant Deputy Under Secretary for Health (ADUSH) for Quality, Safety, and Value, misused travel funds when she and a secretary routinely traveled to Washington, DC, to work when they could work remotely from their duty station in Ann Arbor, MI.

Objective, Scope, and Methodology

To assess the allegation, we interviewed Dr. Hemphill; Dr. James Tuchschmidt, Acting Principal Deputy Under Secretary for Health; and other VA employees. We also reviewed travel, email, and personnel records, as well as relevant Federal laws and regulations and VA policy.

Applicable Regulations and Standards

Federal Travel Regulations state:

Agencies may pay only those expenses essential to the transaction of official business. 41 CFR § 301-2.2.

Employees must exercise the same care in incurring expenses that a prudent person would exercise if traveling on personal business. Id., at § 301-2.3.

Employees are responsible for expenses over the reimbursement limits established in this chapter. Your agency will not pay for excess costs resulting from circuitous routes, delays, or luxury accommodations or services unnecessary or unjustified in the performance of official business. <u>Id.</u>, at § 301-2.4

VA policy states:

Employees traveling on official business will have approval in writing or electronically from a direct line supervisor. VA Travel Administration, Volume XIV, Chapter 1, Paragraph 010201A1, (May 2013).

No VA employee may approve his or her own travel, nor may an alternate preparer approve the travel expenses submitted on behalf of a traveler. <u>Id.</u>, at 010201A2.

Each employee who approves, directs or performs travel will exercise diligence and practice economy in all matters involving travel costs. Travel will be conducted at Government expense in accordance with statutory requirements and VA policy. <u>Id.</u>, at 010201A3.

The traveler will have an approved travel authorization for official travel prior to departure. Authorizations are not complete until the document successfully routes through the travel system. <u>Id.</u>, at 010201D1.

Results

Issue: Did Dr. Hemphill and a Secretary Misuse Travel Funds?

Personnel records reflected that Dr. Hemphill began her VA career on April 24, 2011, as the VHA Deputy Chief Patient Safety Officer with NCPS. She told us that in 2012, she also took on the responsibilities of the Director of NCPS when the previous Director left VA. On October 3, 2012, she was detailed into the Acting ADUSH for Quality, Safety and Value (QSV) position until Dr. Carolyn Clancy was appointed to the position in August 2013. However, due to leadership changes, Dr. Clancy then became the Interim Under Secretary for Health (USH) in July 2014, and Dr. Hemphill was again detailed as the Acting ADUSH for QSV, with her detail being extended several times. Dr. Hemphill told us that in addition to being the Acting ADUSH for QSV, she continued to perform her duties as the NCPS Director in Ann Arbor, MI, working in multiple capacities within VHA.

Alleged Misuse of Travel Funds

Travel records reflected that Dr. Hemphill traveled 39 times between July 2014 and May 2015 while being detailed into the Acting ADUSH for QSV position. Of these 39 trips, 26 were to VA Central Office (VACO), Washington, DC, with 16 trips to perform her duties as the Acting ADUSH for QSV and 10 to attend the monthly National Leadership Council (NLC) meetings. The NLC website reflected:

The National Leadership Council serves as the key governance element for deliberation, serving in a recommendation and advisory capacity to the Under Secretary for Health. The National Leadership Council makes recommendations on all matters that are cross-cutting, discusses items that require high-level deliberation, acts on Executive Decision Memos for

recommendation to the Under Secretary for Health, and assures the integration of all actions taken by the governance organizations. The National Leadership Council must be agile and responsive to needs and changes in the organization. The National Leadership Council may direct Committees to undertake a particular action and performance metric based on the needs of the organization.

As Dr. Hemphill's supervisor and in considering her workload, Dr. Tuchschmidt told us that he did not consider her travel excessive. Dr. Hemphill and other VA employees told us that, in addition to Dr. Hemphill's Acting ADUSH duties, she also performed as the NCPS Director in Ann Arbor, MI, and moving her to Washington, DC, would not be in the best interest of VA. The Director for QSV Risk Management told us that the previous Acting ADUSH traveled as frequently as Dr. Hemphill. The secretary who traveled with Dr. Hemphill told us that Dr. Hemphill attended meetings remotely, at times, using the Veterans Affairs National Telecommunications System (VANTS) or other methods when possible. Only one QSV employee said, in her opinion, since Dr. Hemphill had a Deputy stationed at VACO, it was not necessary for her to travel as much as she did to VACO.

In reference to the allegation that the secretary misused travel funds when she traveled with Dr. Hemphill to VACO, a review of her travel records from July 2014 to May 2015 reflected that the secretary traveled to VACO five times between July and October 2014 to support Dr. Hemphill in her duties as the Acting ADUSH for QSV. Three QSV employees told us that when Dr. Clancy became the Interim USH, she took her secretary with her to support her in that interim position, necessitating Dr. Hemphill to occasionally have the secretary travel to VACO with her for support. The secretary told us that she accompanied Dr. Hemphill only in the beginning to help her maintain continuity while Dr. Hemphill got settled as the Acting ADUSH as well as maintaining her position as the NCPS Director. Only one QSV employee told us that, in her opinion, it was unnecessary for the secretary to conduct this travel to VACO, as there was sufficient administrative support at VACO.

Conclusion

We did not substantiate that Dr. Hemphill or the secretary misused travel funds. There was a need for Dr. Hemphill to travel to VACO to perform her duties as the Acting ADUSH for QSV and for the secretary to support her adjustment to holding two positions. Although one QSV employee told us that it was not necessary for Dr. Hemphill or the secretary to travel to VACO, other employees said that past ADUSHs traveled with the same frequency as Dr. Hemphill to accomplish the same duties. Further, Dr. Clancy left a void when she took her own secretary with her when detailed to the Interim USH position, so there was a need for the secretary to help Dr. Hemphill adjust to performing her duties in two high-level positions. Dr. Tuchschmidt told us that he did not think Dr. Hemphill's travel was excessive compared to her workload, and it would not be in the best interest of VA to transfer her to VACO, since she also performed the duties of her position in Ann Arbor, Ml. Moreover, travel records reflected that the secretary only accompanied Dr. Hemphill at the beginning of her tenure, and having a secretary travel

with her to assist in this adjustment was reasonable. We are therefore closing these allegations.

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